

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	mr	1014	1/24/00
O.I.P.E. CLASSIFIER			3/31/00
FORMALITY REVIEW		104477	4-5-00
RESPONSE FORMALITY REVIEW		14477	6-10-00

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	1/23/00
Original	1/23/00
1	✓ ✓ ✓
2	✓ ✓ ✓
3	0
4	✓
5	—
6	—
7	✓
8	0
9	D
10	0
11	✓
12	✓
13	✓
14	✓
15	✓
16	0
17	✓
18	—
19	✓
20	0
21	✓
22	0
23	✓ 0 0
24	✓ ✓ ✓
25	✓ ✓ ✓
26	✓
27	—
28	—
29	—
30	—
31	—
32	—
33	—
34	—
35	—
36	—
37	✓
38	—
39	—
40	✓
41	—
42	—
43	—
44	—
45	—
46	—
47	✓ ✓ ✓ 0
48	✓ ✓ ✓ 0
49	✓ ✓ ✓ 0
50	✓ ✓ ✓ 0

Claim	Date
Final	1/23/00
Original	1/23/00
51	✓ ✓ ✓
52	✓ 0
53	0 0
54	✓ 0
55	✓ ✓
56	0 0
57	X 0
58	✓ 0
59	✓
60	0
61	✓ ✓ ✓
62	✓ 0
63	—
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Claim	Date
Final	1/23/00
Original	1/23/00
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150	—

If more than 150 claims or 10 actions
staple additional sheet here

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